Cherry St.	ite Of Return Carrier Additional Documentation ection Form		FCC Form 481 4 OMB Control No 43060 July 2013	0986/OMB Control No. 3060:0819
<010>	Study Area Code 409025			
<015>		Mobile USA LP		
<020>	Program Year 2014	W		
<030>		Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030			
<039>	Contact Email Address - Email Address of person identified in data line <030	> andy.m.lancaster@sprint.com	*****************	
	he boxes below to note compliance on its five year service quality plan (pu CFR § 54.313(f)(2). I further certify th Progress Report on S Year Plan		g compliance with the financial	
	- ·			
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Information	r	
	Please check this box to confirm that the attached PDF, on line 3012,		LI	
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.			
(3012) (3013) (3014)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	Name of Attached Document Listing Required Information	(Yes/No) (Yes/No)	· · · · · · · · · · · · · · · · · · ·
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)			
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		ULi	
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	$\label{thm:management} \textbf{Management letter} \ is sued by the independent certified public accountant that performed the company's financial audit.$			
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.			
(3023)	Underlying information subjected to a review by an independent certified			
(3024)	public accountant. Underlying information subjected to an officer certification.		ā	
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information		

Certificat Data Coll	ion - Reporting Carr ection Form	fer FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013						
<010>	Study Area Code	409025						
<015>	Study Area Name	Virgin Mobile USA LP						
<020>	Program Year	2014						
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster						
<035>	<035> Contact Telephone Number - Number of person identified in data line <030> 913 - 762 - 6107							
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com						

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities inc recipients; and, to the best of my knowledge, the information reported on			for universa	l service support	
Name of Reporting Carrier: Virgin Mobile USA LP					
Signature of Authorized Officer: CERTIFIED ONLINE			Date	10/10/2013	
Printed name of Authorized Officer: Jay Franklin				, i	
Title or position of Authorized Officer: Assistant Controller			,		
Felephone number of Authorized Officer: 913 762 6107					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Study Area Code of Reporting Carrier: 409025	Filing Due Date for this form:	10/15/2013			

	ion - Agent / Carrier ection Form	FCC-Form 481 OMB control No. 3060-0986/OMB Control No. 3060-0819 UV 2013						
<010>	Study Area Code	409025						
<015>	Study Area Name	Virgin Mobile USA LP						
<020>	Program Year	2014						
<030>	Contact Name - Person	USAC should contact regarding this data Andrew M. Lancaster						
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107							
<039>	Contact Email Address	- Email Address of person identified in data line <030> andy.m.lancaster@sprint.com						

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; n agent; and, to the best of my knowledge, the reports and	ny responsibilities include ensuring the accuracy of the annual da	nformation reported on behalf of the reporting carrier ata reporting requirements provided to the authorized
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:		Date:
Printed name of Authorized Officer:		
Fitle or position of Authorized Officer:		
Celephone number of Authorized Officer:	4	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipie	ents on Behalf of Reporting Carrier
	norized to submit the annual reports for universal service suppor reporting carrier; and, to the best of my knowledge, the informa	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agent	·	
Telephone number of Authorized Agent or Employee of Ag	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(800) Operating Companies  Data Collection Form		FCC Form 431 OMB Control No. 30.594 July 2013	0986//OMB/Control No., 2060-0819

<010>	Study Area Code 409025	
<015>	Study Area Name Virgin Mobile USA LP	
<020>	Program Year 2014	
<030>	Contact Name Person USAC should contact regarding this data Andrew M. Lancaster	and the second s
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107	
<039>	Contact Email Address - Email Address of person identified in data line <030> andy.m, lancaster@sprint.com	
<810>	Virgin Mobile USA Reporting Carrier	
<811>	Holding Company Sprint Corporation	
<812>	Operating Company	

13>		<a1>3 1 ≤ 3</a1>		<a2>*</a2>	≪aB>
		Affiliates		SAC	Doing Business As Company or Brand Designation
	Virgin Mobile	USA LP		409025	Assurance Wireless
			· · · · · · · · · · · · · · · · · · ·		
			<u> </u>		
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17/20/20 20/20/20/20	m 481 - Carrier Annual Reporting Ollection Form	: FECForm OMB cont July 2013	331 ol No-3060-0886/OMB Control No-3060-0819
<010>	Study Area Code	419024	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster	* * * * * * * * * * * * * * * * * * *
<035>	Contact Telephone Number: Number of the person identified in data line <030:	913-762-6107	
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com	
ANNÚA	LL REPORTING FOR ALL CARRIERS	19. The second s	53:5183 53:4722 Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) no outages to report	
<300> <310> <320> <330>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	(attach descriptive document) (attach descriptive document)	
<400> <410> <420> <430> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed Mobile 2.8786  Number of Complaints per 1,000 customers (broad Fixed Mobile	· · ·	
<1010> <1100> <1110>	Service Quality Standards & Consumer Protection  419024ks510  Functionality in Emergency Situations  419024ks610  Company Price Offerings (voice)  Company Price Offerings (broadband)  Operating Companies and Affiliates  Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability  Terrestrial Backhaul (Y/N)?  Terms and Condition for Lifeline Customers	Rules Compliance  (check to indicate certification)  (attached descriptive document)  (check to indicate certification)  (attached descriptive document)  (complete attached worksheet)  (complete attached worksheet)  (if yes, complete attached worksheet)  (check to indicate certification)  (attach descriptive document)  (if not, check to indicate certification)  (complete attached worksheet)  (complete attached worksheet)	
<2000> <2005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Price Cap Additional Rate of Return Carriers, Proceed to <u>ROR Additional</u>	ice Cap Local Exchange Carriers  (check to indicate certification) (complete attached worksheet)  al Documentation Worksheet (check to indicate certification)	
<3005>	$(x,y) = (x,y) \cdot f(y)$	(complete attached worksheet)	

	ervice Quality improvement Reporting illection Form		FCC Förm 481 OMB(Control Not 3060-098 July 2013: 77-8-1	6/OMB Control No., 3060 08:	19
<010>	Study Area Code				
<015>	Study Area Name Virgin Mobile	e USA LP			
<020>	Program Year 2014		4 1 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A		
<030>		M. Lancaster	AND SECURITY OF THE SECURITY O	· · · · · · · · · · · · · · · · · · ·	Ya Ya
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-	762-6107			1 7 2
<039>	Contact Email Address - Email Address of person identified in data line <030> and				10.00
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) O			
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no )			The A
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.				
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your competition only receives frozen support, your progress report is only	pany is a			
	required to address voice telephony service.				
		Name of Attache	d Document (.pdf)	-	
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.				
<113>	Maps detailing progress towards meeting plan targets				
<114>	Report how much universal service (USF) support was received		e de la companya de		
<115>	How (USF) was used to improve service quality				**
<116>	How (USF)was used to improve service coverage		Ar v		
<117>	How (USF) was used to improve service capacity				· !
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.				** £

I was bridged displaying	vice Outage Re lection Form	eporting (Vol	t <b>e)</b>	A DE LA VIEN	spool and a				ÖN	Form 481 B Control No. 3060 2013	-0986/OMB Control (	No.: 3060-0819
<010>	Study Area Co	ode				419024						
<015>	Study Area N					Virgin Mobile USA	A LP				<del></del>	
<020>	Program Year					2014						
<030>			C should conta	ct regarding thi	s data	Andrew M. Lancast	er	***		· · · · · · · · · · · · · · · · · · ·		
<035>						30> 913-762-6107						
<039>						)30> andy.m.lancas	ter@sprint.com					
<220>	<a>&gt;</a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f> Did This Outage</f>	<g></g>	<h>&gt;</h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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		<u> </u>	<del> </del>	<u> </u>	<del> </del>	<del> </del>			<del></del>			
	-	<del>                                     </del>		+	<del> </del>	<del>                                     </del>			-			<u> </u>

Data Col	ce Offerings Including Voice Rate Data lection Form	FGG Form 481 OMB Gontrol Not, 3060-0986/OMB Gontrol Not, 3060-0819 July 2013
<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.milancaster@sprint.com
<701>	Residential Local Service Charge Effective Date 1/1/2013	

<702> Single State-wide Residential Local Service Charge

<703>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	<63> State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	
State	Exchange (ILEC)	JAC (CETC)	Nate Type	Service Rate	State Subscriber Line Charge	State Offiversal Service Fee	Service Charge	Total per line Rates and Fe
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				See att	ached worksheet			
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(710):Broadband!Price Offerings

Data Collection Form

July 2013:

<010>	Study Area Code	419024		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data line <030> andy. m.lancaster@sprint.com			

<711>

** ( <b>°à1&gt;</b> *,,:*	<a2></a2>	<b1></b1>	 6b2>	. «»	<q1> ***</q1>	<d2></d2>	\$635£	<04>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
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W. 107 W. 117								
				<u> </u>				
	<u> </u>	Se	e attached		· · · · · · · · · · · · · · · · · · ·			<del> </del>
		work	sheet					
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<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <0	030> andy.m.lancaster@sprint.com
<810>	Reporting Carrier Virgin Mobile USA LP	
<811>	Holding Company Sprint Corporation	
<812>	Operating Company	

	Affiliates		SAC	Doing Business As Company or Brand Designation
	Amiliates		. Jac	boling business As company of brand besignation
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		See	attached works	heet
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	bali Lands Reporting	F.GGForm 480
Data Coll	ection!Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data line	<pre>&lt;030&gt; andy.m.lancaster@sprint.com</pre>
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	
1320		Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	
		Select
		(Yes,No,
		NA)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	
.5.25	The state of the s	and the second

A CONTRACT OF THE PARTY OF	o Terrestrial Backhaul Reporting ection Form	FCG Form 481 *OMB/Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
han stocker early in the		
<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

Lifeline -	rms:and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. (3060-0819 July 2018
<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030	> 913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030	)> andy.m.lancaster@sprint.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of attached document (.pdf)
<1220>	Link to Public Website HTTP_	http://www.assurancewireless.com/Public/TermsandConditions.aspx
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	
w.		

4.10.300	ce Cap Carrier Additional Documentation	and the second seco	FCGForm 481k	
24/23/2015	ection Form		OMB Control No.: 3060-0986/OMB Control No.; 306 July 2018	60-0819
luding	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Ca	rriers	July 2015	
.010-	Chudu Assa Cada	419024		
<010> <015>	Study Area Code Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line			
<039>	Contact Email Address - Email Address of person identified in data line	· · · · · · · · · · · · · · · · · · ·		
real see of				des.
HECK th		ect America Phase I support, frozen High Cost support, High Cost support to offset		1
	support as set forth in 47 LFR 9 54.313(D	),(c),(d),(e) the information reported on this form and in the documents attached	below is accurate.	
	Incremental Connect America Phase I reporting			
2010>	2nd Year Certification (47 CFR § 54.313(b)(1))			
2011>	3rd Year Certification (47 CFR § 54.313(b)(2))			
	Price Can Carrier Receiving Frozen Support Certification (47 CFR & 54	312(a)\		
20125	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.	.312(a)}		
2012>	2013 Frozen Support Certification	.312(a)}		
2013>	2013 Frozen Support Certification 2014 Frozen Support Certification	.312(a)}		
2013> 2014>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification	.312(a)}		
2013> 2014>	2013 Frozen Support Certification 2014 Frozen Support Certification	.312(a)}		
2013> 2014> 2015>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	.312(a)}		
2013> 2014> 2015>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification	.312(a)}		
2013> 2014>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband	.312(a)}		
2013> 2014> 2015>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	.312(a)}		
2013> 2014> 2015> 2015>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e))	.312(a)}		
2013> 2014> 2015> 2016>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification	.312(a)}		
2013> 2014> 2015> 2016> 2017> 2018> 2019>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification			
22013> 22014> 22015> 22016> 22017> 22018>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification	e 2021,		
2013> 2014> 2015> 2016> 2017> 2018> 2019>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached PDF, on line	e 2021, ĵii), as a recipient		
2013> 2014> 2015> 2016> 2017> 2018> 2019>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached PDF, on line contains the required information pursuant to § 54.313 (e)(3)(	e 2021,  ii), as a recipient addresses of		
2013> 2014> 2015> 2016> 2017> 2018> 2019>	2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification  Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband  Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached PDF, on lincontains the required information pursuant to § 54.313 (e)(3)(a) of CAF Phase II support shall provide the number, names, and	e 2021,  ii), as a recipient addresses of		

100 /47	ate Of Return Carrier/Additional Documentation:			FCC Form 481 OMB Control No July 2013	3060 0986/ON	NB Control No	3060-0819	
1. 2 at 2 and 2.			Walter State Control State	A CONTRACTOR				A CONTRACT
- <010>	Study Area Code 419024							
<015>		bile USA LP			-	T	*	
<020>	Program Year 2014					1 16		-
<030> <035>	Contact Name - Person USAC should contact regarding this data And Contact Telephone Number - Number of person identified in data line <030>	rew M. Lancaster 913-762-6107			<del></del>		- I	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	<del> </del>		<del> </del>		i i	-
			ē					
	he boxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that t		rriers, ensuring c	ompliance with the f	inancial reportin		its set forth in	47
	Progress Report on 5 Year Plan						A ·	
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required In	formation				1	
	Please check this box to confirm that the attached PDF, on line 3012,						:	
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.			·				
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports (Operating Report for	Name of Attached Document Listing Required In	formation	(Yes/No)			a v	
	Telecommunications Borrowers)			<del></del>				
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows			السسطا		. >		
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation  If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required In	formation	(Yes/No)	· ·	3'	<u>. \$ _</u> &_	
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains							
(3019)	Either a copy of their audited financial statement; or (2) a financial report	•	• :					
(3020)	in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows							
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.				· · · · · · · · · · · · · · · · · · ·			
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications							
(3023)	Borrowers, Underlying information subjected to a review by an independent certified public accountant		*					
(3024)	Underlying information subjected to an officer certification.							
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows							
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required In	forting at the					
(5023)	The state of the s	wome of Attached pocument risting Redailed in	rormation	,				

<010>	Study Area Code	419024		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster		
<035>	Contact Telephone N	lumber - Number of person identified in data line <030> 913-762-6107		
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com	 	5.78.74

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

### Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Virgin Mobile USA LP

Signature of Authorized Officer: CERTIFIED ONLINE

Date 10/10/2013

Printed name of Authorized Officer: Jay Franklin

Title or position of Authorized Officer: Assistant Controller

Telephone number of Authorized Officer: 913 762-6107

Study Area Code of Reporting Carrier:

419024

Filing Due Date for this form: 10/15/2013

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion : Agent / Carrier ection Form	FCGForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0986 July 2013
<010>	Study Area Code	419024
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person US	AC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone Number	er - Number of person identified in data line <030> 913-762-6107
<039>	Contact Email Address - Er	mail Address of person identified in data line <030> andy.m.lancaster@sprint.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on be	
also certify that I am an officer of the reporting carrier; r agent; and, to the best of my knowledge, the reports and	ny responsibilities include ensuring the accuracy of the annual data reporting requirements I data provided to the authorized agent is accurate.	s provided to the authorized
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date:	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:	And the Mark Control of the Control	
	Filing Due Date for this form.	

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	Authorized to File Annual Reports for CAF or LI Recipie	nts on Benair of Reporting Carrier
	orized to submit the annual reports for universal service support reporting carrier; and, to the best of my knowledge, the informati	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Fitle or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Age	ent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(POO) Charatisa Campaniac	The state of the s	and the second of the second o	RCG/Form 481
(800) Operating Companies			rce rommeau
Data Collection Form			6(MB Gentinal No. 3050:0986/6(MB Campral No. 2060:0809)
DataConections of the			
A Security Security			July 2013

<010>	Study Area Code	419024		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <0	030> 913-762-6107	, já	
<039>	Contact Email Address - Email Address of person identified in data line <	030> andy.melancaster@sprint.com		
<810>	Virgin Mobile USA LP			
<811>	Holding Company Sprint Corporation		A TOP AND THE SECOND	
<812>	Operating Company			

			Af	ffiliates			SAC	Doing Business As Company or Brand Designation
_	Virgin		USA LP				419024	Assurance Wireless
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	m481 - Carrier Annual Reporting		FCCFor OMB Co July 2013	ntrol No. 3060-0986/OMB (	
<010>	Study Area Code	429025	·		
<015>	Study Area Name	Virgin Mobile USA	LP		
<020>	Program Year	2014			***
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancast	er		
<035>	Contact Telephone Number: Number of the person identified in data line <030	913-762-6107		<u> </u>	
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@	#sprint.com	<del>مورد کا در ایک در ا</del>	
ANNUA	LIREPORTING FOR ALL CARRIERS			5483 Comple Requ	ation Complation
<100>	Service Quality Improvement Reporting		(complete attached worksheet)		
<200> <210>	Outage Reporting (voice)	no outages to report	(complete attached worksheet)		
<300> <310> <320> <330>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)		(attach descriptive document) (attach descriptive document)		
<400> <410> <420>	Number of Complaints per 1,000 customers (voice Fixed Mobile	) : :			
<430> <440> <450>	Number of Complaints per 1,000 customers (broad Fixed Mobile	lband)			
<500>	Service Quality Standards & Consumer Protection	Rules Compliance	(check to indicate certification)		
<510> <600>	429025mo510 Functionality in Emergency Situations		(attached descriptive document) (check to indicate certification)		<b>I</b>
<610>	429025mo610		(attached descriptive document)		
	Company Price Offerings (voice) Company Price Offerings (broadband)		(complete attached worksheet) (complete attached worksheet)		
	Operating Companies and Affiliates		(complete attached worksheet)		
	Tribal Land Offerings (Y/N)?		(if yes, complete attached worksheet)	5.73.2	
<1000>	Voice Services Rate Comparability		(check to indicate certification)		
<1010>			(attach descriptive document)		
	Terrestrial Backhaul (Y/N)?		(if not, check to indicate certification)		
<1110> <1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet) (complete attached worksheet)		
	Price Cap Carriers, Proceed to Price Cap Additiona Including Rate-of-Return Carriers affiliated with Pri				
<2000>			(check to indicate certification)	*	6.20.00
<2005>			(complete attached worksheet)		
	Rate of Return Carriers, Proceed to ROR Additiona	Documentation W	orksheet		
<3000>	in the second se		(check to indicate certification)		
<3005>			(complete attached worksheet)		
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	10 10 10 10 10 10 10 10 10 10 10 10 10 1	1500mm 150000000000000000000000000000000

V4070000005503	ervice Quality Improvement Reporting illection Form	19	EGC Form 1481 OMB Control Nov. 3060-0986/OMB C July 2013	ontrol/No: 3060=0819 +*
<010>	Study Area Code			
<015>	Study Area Name Virgin Mob	rile USA LP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
<020>	Program Year 2014			*
<030>	Contact Name - Person USAC should contact regarding this data And	rew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030> 9	13-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com		
<110>	Has your company received its ETC certification from the FCC?	(yes/no) O		
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no )		in the second se
	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.			
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your co CETC which only receives frozen support, your progress report is only required to address voice telephony service.	ompany is a		
		Name of Attache	ed Document (.pdf)	<del></del>
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.			
<113>	Maps detailing progress towards meeting plan targets		inger Statistics	
<114>	Report how much universal service (USF) support was received			
<115>	How (USF) was used to improve service quality			
<116>	How (USF)was used to improve service coverage			<u>, 1</u>
<117>	How (USF) was used to improve service capacity			
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.			A STATE OF THE STA

(200) Service Outage Reporting (Voice)		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013

<010>	Study Area Code	429025			
<015>	Study Area Name	Virgin Mobile USA LP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107				
<039>	Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster#sprint.com				

<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
	NORS	J 1				-				Did This Outage		
	Reference		Outage Start		Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		1.
	Number	Date	Time	Date	Time	Customers Affected	1	Affected	Description (Check		Service Outage	Preventative
		ļ					Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
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Charles Street	ce Offerings including Voice Rate Data ection Form			FCC Form 481 OMB controllNo. 3060-0986 July 2013	5/OMB/GontrollNot 3060-0819
<010>	Study Area Code	429025			
<015>	Study Area Name	Virgin Mobile USA LP	and the second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy m.lancaster@sprint.com	1		
<701>	Residential Local Service Charge Effective Date 1/1/2013				
<702>	Single State-wide Residential Local Service Charge			4.4	

<703>

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	<b3> <a href="#"><a href="#"></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></b3>	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
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